

Please type a plus sign (+) inside this box ----&gt; +

Approved for use through 9/30/2000, OMB 0651-0031

Patent and Trademark Office: U.S. Department of Commerce

JUL 22 2002

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

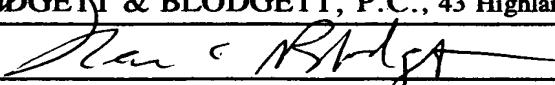
Total Number of Pages in this Submission

Application Number	09/036,236
Filing Date	March 6, 1998
First Named Inventor	Oliver, David M.
Group Art Unit	3625
Examiner Name	Thompson, F.
Batch No. (if applicable)	N.A.
Total Number of Pages in this Submission	Attorney Docket Number
	005-905-300

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Formal Drawing(s)	<input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief, Withdrawal of Appeal)
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Corrected drawings	<input type="checkbox"/> AUG 0 [2] 2002 Proprietary Information
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related papers	<input type="checkbox"/> GROUP 3600
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to convert to Provisional application	<input type="checkbox"/> Issue Fee Due (PTOL85b)
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Return receipt postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Information Disclosure Statement/PTO-1449	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Preliminary Amendment
<input type="checkbox"/> Certified Copy of Priority Document(s)		<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	Remarks	Extension of Time Petition incorporated in Notice of Appeal

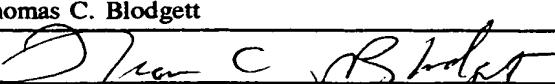
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name and Firm	Thomas C. Blodgett BLODGETT & BLODGETT, P.C., 43 Highland Street, Worcester, MA 01609-2797	Registration No. 30,933
Signature		CUSTOMER NO. 20433
Date	15 JULY 2002	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

15 JULY 2002

Typed or printed name	Thomas C. Blodgett
Signature	

RECEIVED 15 JULY 2002

JUL 31 2002

Technology Center 2600

COPY OF PAPERS  
ORIGINALLY FILED

PTO/SB/17 (08-00)

Approved for use through 10/31/2002, OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL  
FOR FY 2000O I P E J C R E  
JUL 2 2 2002

## TOTAL AMOUNT OF PAYMENT

(\$620.00) PTO/VT &amp; TRADEMA

## COMPLETE IF KNOWN

Application Number	09/036,236
Filing Date	March 6, 1998
First Named Inventor	Oliver, David M.
Examiner Name	Thompson, F.
Group Art Unit	2765
Attorney Docket No.	005-905-300

RECEIVED

JUL 31 2002

Technology Center 2000

## METHOD OF PAYMENT (check one)

1.  X The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 02-2838

Deposit Account Name CUSTOMER NUMBER 20433  
Blodgett & Blodgett, P.C.

- X Charge any additional fee required under 37 CFR 1.16 and 1.17
- X Applicant claims small entity status. See 37 CFR 1.27

2.  X Payment Enclosed X Check #12664 Credit card

## FEE CALCULATION (continued)

3. ADDITIONAL FEES  
Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing an request for ex parte reexamination	
112	920	112	920	Requesting publication of SIR prior to Examiner action	
113	1840	113	1840	Request publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	460.00
118	390	218	695	Extension for reply within fourth month	
128	1,680	228	945	Extension for reply within fifth month	
119	310	219	135	Notice of Appeal	160.00
120	310	220	165	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR §1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR §1.129(b))	
179	710	270	355	Request for Continued Examination (RCE)	
Other fee (specify)					
(3)SUBTOTAL					\$620.00

RECEIVED

AUG 02 2002

GROUP 300

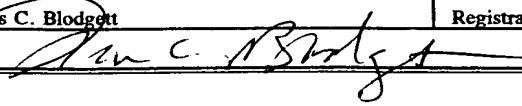
## 2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	80 - 20 =		
Independent claims	9 - 3 =		
Multiple dependent			

or number previously paid, if greater; For reissues, see below

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$0)		

SUBMITTED BY: Complete (if applicable)

Name (Print/Type)	Thomas C. Blodgett	Registration No. 30,933	Telephone:	(508) 753-5533
Signature			Date:	15 July 2002